President’s Report

President, NASPGHAN: Jenifer Lightdale, MD, MPHF, NASPGHAN-F

Dear Friends and Colleagues:

**BE INTENTIONAL.** As President of NASPGHAN in 2023, I’m opting to use my spring newsletter column to highlight these two simple words as a critical and guiding principle for our ever expanding, multifaceted, and extraordinary community. To my understanding, NASPGHAN can be defined as an intentional organization because it aspires to create a culture of trust and collaboration that motivates its members. I know that many of you, just like me, find personal joy in the fact that NASPGHAN views intentionality as key to sustaining our role as the professional society for all who care for children with digestive disorders. And at this point, I really do feel that intentionality is palpable at all levels of NASPGHAN operations, so it feels fitting to take a few minutes to reflect on this.

First, I very much want to acknowledge with gratitude that being intentional at NASPGHAN is requiring both individual and collective work. Specifically, it is requiring all Society leaders, including committee chairs, course directors, councilors, grants, awards, and nominations reviewers, as well as yours truly, to intentionally consider our implicit biases, as well as our options beyond the most obvious, whenever and wherever we are making decisions.

For example, this past year we codified a transparent and proactive process by which vice-chairs are appointed. In doing this, we considered that vice-chairs of committees almost always become chairs. This means a focus on the vice-chair process is critical if we are to have Society leadership that is diverse, equitable and inclusive. With guidance from Council and the Professional Development Committee, we standardized a timeline last fall for filling outstanding posts. The process calls for chairs to issue requests for applications to their entire committee, and then to subsequently engage with leadership in the intentional consideration of candidates.

Moving forward, all NASPGHAN members should look for these and other RFAs for opportunities across the Society, including leadership and other volunteer service posts, research grants, single topic symposium proposals and award nominations.

From the Executive Leadership perspective, our hope is that the intentional emphasis on transparent and standard processes for announcing and appointing positions at NASPGHAN increases our potential to engage all members. We are committed to continually monitoring the impact of the vice-chair and other similar processes on leadership outcomes at all levels. We are also looking for opportunities to be transparent with NASPGHAN at large about our results, as well as how we are measuring them ([see table, next page](#)). As the data shows, we are doing relatively well in some respects and have miles to go in others. Being intentional is vital if NASPGHAN is to close the gaps and keep them closed.

I think many of us agree that at baseline, “representation matters.” To this end, making deliberate efforts to notice unconscious biases, and then to slow down before acting, is turning out to be especially important when NASPGHAN members are being named for visible positions. As all members who have recently submitted proposals for guideline development, course agendas, webinar panels, and patient education tools can attest, NASPGHAN has been increasingly employing an explicit data stratification lens using self-reported member demographics that allows intentional assignments of roles across the Society. I am particularly appreciative of all who are continually working to ensure meaningful inclusion of our colleagues who are underrepresented in medicine (URIM) and/or in leadership, as well as those who may be from regions, locales and/or institutions that are beyond those that often immediately come to mind.

I also want to congratulate my great friend and NASPGHAN President-elect, Dr. Vicky Ng, who has organized an exciting 51st Annual Meeting to be held in San Diego, October 4-7, 2023. By emphasizing the importance (President’s Report continues on the following page)
of data collection, standardizing the processes by which speakers and moderators are chosen, as well as by performing equity analyses to identify gaps, the entire AM Planning Committee actively engaged in being intentional. In turn, Dr. Ng has led us to a stellar program that features both well-known and up-and-coming experts that are balanced across genders, involve ~ 20% URiM, and >80 institutions/centers across North America. As all who participated in January can attest, intentionally putting together the Single Topic Symposium, the Postgraduate Course and the Annual Meeting has encouraged a deeper level of thinking, more discourse, and blind-spot recognition within NASPGHAN. And it is clear that the talented slate of faculty that was developed for the October meeting will be collectively certain to advance our understanding of pediatric GI, pancreatology, hepatology and nutrition. I am so looking forward to coming together as a greater society in San Diego to learn about scientific and clinical care advances across all aspects of our remarkable subspecialty and truly hope to see all of you there!

In the meantime, NASPGHAN grows bigger every year, and being intentional is allowing much amazing, new talent entering our field to take on increasing responsibility and leadership roles. This has been illustrated by fantastic initiatives such as our Shark Tank, our Advocacy efforts, our Bowel Sounds podcasts, as well as all of the projects and initiatives being worked on by our energetic committees and SIGs. Being open to new talent is allowing NASPGHAN to innovate, support each other and thrive. I am convinced that being intentional together improves our Society infrastructure and processes in myriad ways that are continually driving our medical subspecialty forward.

Finally, I would note that being intentional is also helping us to build collaborations amongst many diverse stakeholders, both within and outside of NASPGHAN. Within NASPGHAN, emphasis is increasingly being placed on collaborative efforts across committees and SIGs to define mutual standards of care and develop guidelines. Course directors are intentionally considering the broad scope of our subspecialty field as they compile faculty slates that reflect all organs of interest (i.e., lumen, liver, pancreas) and other aspects of our field (basic science, clinical research, nutrition, endoscopy, neuromotility, quality improvement), as well as perspectives from our many high value, multidisciplinary, clinical team members (psychologists, social workers, nursing colleagues and nutrition professionals).

Outside of NASPGHAN, we continue to partner actively with the American Academy of Pediatrics (AAP) and the Pediatric Academic Societies (PAS) to improve, define and advocate for optimal pediatric healthcare. We have also played a formative role, along with our fellow pediatric subspecialists, in critical decisions around training programs (i.e. the match!) in the Council on Pediatric Subspecialties (CoPS). We are learning through many active efforts with our international colleagues, particularly the European, Latin American and Asian Pan Pacific societies (ESPGHAN, LASPGHAN and APPSPGHAN). We are taking leading roles in a number of empowering groups in gastroenterology focused directly on diversity, equity and inclusion, including the Intersociety Group on Diversity (IGD), Scrubs and Heels, the Gastroenterology Women’s Coalition (GWC) and Women In Endoscopy (WIE).

In another exciting collaboration, NASPGHAN leadership has been meeting monthly with the so-called Group of 8, which includes executive leadership from the American Gastroenterological Association (AGA), the American College of Gastroenterology (ACG), the American Association for the Study of Liver Disease (AASLD), and the American Society of Gastrointestinal Endoscopy (ASGE). In general, taking time to engage in such “diplomacy” feels worthwhile, and it is gratifying to feel the profile of pediatric GI as a specialty being elevated as we find mutual areas of importance that are more powerfully advanced together with our colleagues who treat adults.

I will close by noting that like many of us, I consider NASPGHAN to be my professional family. This endearing sentiment has carried us for more than 50 years from a time when all the members of NASPGHAN could fit into one hotel room at Chicago’s historic Palmer House, to this past month at DDW when we needed the grand Empire Room for our Society’s reception (see pictures, pages 10-11). Thank you for joining me in being intentional as we continue to grow as a society so that NASPGHAN remains a welcoming home for all pediatric gastroenterologists.

With great appreciation for you all,

Jenifer R. Lightdale, MD, MPH, NASPGHAN-F
President, NASPGHAN

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Dear Colleagues,

Greetings from your Secretary Treasurer!

MEMBERSHIP

The current membership of NASPGHAN is about 2,714 (106 emeritus; 9 members who are also members of ESPGHAN; 466 fellows; 30 psychologists; 48 members of the Editorial Board; 1,978 full members; and 77 international). There are 62 Fellow of NASPGHAN members, 519 members in the Association of Pediatric Gastroenterology and Nutrition Nurses (APGNN) and 265 Council for Pediatric Nutrition Professionals (CPNP), who are actively involved in collaborative activities with NASPGHAN. NASPGHAN’s main strength relies on members like you who are committed to making an impact in the field of pediatric gastroenterology, hepatology and nutrition, and the patients and families we serve. Thank you for your support!

FINANCES

The primary sources of revenue for NASPGHAN are membership dues, JPGN royalties, Annual Meeting registration fees, support from sponsors and investments. In 2022, we had an overall negative income. The total income was 2,817,308.92 and the total expenses were 3,807,519.63. The total net income as of December 31, 2022 was — $990,210.71. BBD, a certified public accountant company, is doing the annual audit of our finances.

In 2022, the membership dues, the JPGN income and the Annual Meeting and Postgraduate Course all exceeded expectations. However, due to market volatility, we had unrealized losses of approximately $1.3 million in our investments. These unrealized losses were the primary reason we had a negative net income in 2022.

Our fund balance by December 31, 2021, was $10,927,157.15. By December 31, 2022, our consolidated asset allocation was $9,659,390. NASPGHAN continues to work with the financial firm Glenmede Trust Co., which has been guiding us with our investment portfolio.

The NASPGHAN Finance Committee reviewed NASPGHAN’s financial status and investments and recommended to continue the current investment strategy. The committee will meet 2–4 times per year to review NASPGHAN’s financial status and will work with the Glenmede team on options/strategies regarding the management of our investments. We are hopeful that our investment portfolio will be able to recover and grow, resulting in great income in the near future.

I am looking forward to another successful Annual Meeting this coming October in San Diego. I hope to see you there to discuss new initiatives to continue supporting our members and expanding our current activities.

Your Secretary Treasurer,

Norberto Rodriguez-Baez, MD

Secretary-Treasurer, NASPGHAN
Dallas, TX
NASPGHAN Foundation News
Ann Scheimann, MD, MBA
President, NASPGHAN Foundation

Dear Colleagues and Friends:
As we traverse the first half of 2023, it has been refreshing to return to a semblance of normalcy as reflected by in-person retreats for fellows, junior faculty and the N2U course, accompanied by continuing educational webinars focused on management of cholestatic liver disease.

The NASPGHAN Foundation warmly welcomed Debra Burrowes as Director of Development in March 2023, (see related story below). Debra brings a wealth of experience from her role in the American Academy of Pediatrics with the SOGHN section. Financial committees from NASPGHAN and the NASPGHAN Foundation are working together to improve the benefits of the valuable NASPGHAN support staff who provide the underpinnings for our beloved society.

There are several grants available with deadlines over the summer months (www.naspghan.org/research/naspghan-foundation-grants)—all are strongly encouraged to apply.

The mission statement of the NASPGHAN Foundation is “To Fund and Support The Professional, Patient Education and Research Missions of NASPGHAN”. We greatly value the continuing financial support and generous donations of time by the membership at large and look forward to election of an at-large member to join the NASPGHAN Foundation in October 2023. Through the collective efforts and contributions of so many of you, our organization remains strong—“SMALL BUT MIGHTY”.

I look forward to seeing everyone at the NASPGHAN meeting in San Diego in October!

Sincerely,

Ann Scheimann MD, MBA
President, NASPGHAN Foundation
Baltimore, MD

Debra Burrowes Joins NASPGHAN Foundation as Director of Development

Effective March 20, 2023, Debra Burrowes joined the NASPGHAN Foundation as Director of Development. Debra will help lead and cultivate funding for the NASPGHAN Foundation’s educational and research grant portfolio to advance the mission of NASPGHAN.

Debra has a Master’s degree in Hospital and Health Administration from the University of Iowa and over 25 years’ experience in hospital/health administration and association management. In her most recent position, Debra worked at the American Academy of Pediatrics (AAP) managing the AAP’s Section on Gastroenterology, Hepatology and Nutrition, National Committee on Nutrition, and Section on Allergy and Immunology. In this role, she routinely worked with pediatric subspecialists and corporate partners on a variety of educational initiatives and campaigns. She also became very engaged with the pediatric GI community. Prior to the AAP, Debra worked in several hospital administration positions at the University of Chicago Comer Children’s Hospital and the University of Iowa Hospitals and Clinics.

“I am both honored and excited to join the NASPGHAN Foundation and work with NASPGHAN’s dedicated members and staff to advance research, education, and clinical practice for children with digestive disorders,” said Debra. Anyone with ideas related to fundraising and/or new corporate partners, please contact Debra at (dburrowes@naspghan.org).
SUPPORT YOUR FOUNDATION

Remember that you can donate to the NASPGHAN Foundation from your phone.

TEXT 4GIPEDS to 215-608-5488

A donation link will appear that allows you to make your donation both quickly and securely.

Click here if you would prefer to donate quickly and securely online!

2023 NASPGHAN Foundation Grant Submission Deadlines

July 1 and August 1

Deadlines for the 2023 NASPGHAN Foundation grants are approaching.

Most 2023 grant NASPGHAN Foundation submission deadlines are July 1, but the NASPGHAN Foundation Advanced Fellowship in Pediatric Endoscopy and NASPGHAN Foundation/Abbott Nutrition Advanced Fellowship Training in Pediatric Nutrition have an August 1 deadline.

Apply for any of the 12 available grants being offered this year. Additional information is available on the submission site or on the NASPGHAN website.

NASPGHAN-F

Apply for NASPGHAN Fellow (NASPGHAN-F) Status

Eligible NASPGHAN members can now apply for the Fellow of NASPGHAN status (NASPGHAN–F).

Attainment of the Fellow of NASPGHAN status is for those NASPGHAN members who have made significant contributions to the field of pediatric gastroenterology, hepatology or nutrition. Members with a strong career track record for success as clinicians, physician scientists (MD/DO, MD/DO/PhD) or researchers (PhD/ MSC) in the field of pediatric gastroenterology, hepatology and nutrition are encouraged to apply. Fellow status can be attained by meeting all criteria for either Clinical Practice or Research expertise. The NASPGHAN Executive Council will review all applications, focusing on the quality and breadth of clinical, research and educational contributions and service to the field of pediatric gastroenterology, hepatology and nutrition. Eligibility requirements are available online and details are available here.
Report On Scrubs and Heels 2023

Rina Sanghavi, MD and Vicky Ng MD

On behalf of NASPGHAN, the Professional Development Committee (PDC) chair, Rina Sanghavi, and the President Elect, Vicky Ng, attended Scrubs and Heels 2023, held in California, on February 18-19, 2023.

Founded by two adult gastroenterologists, Dr. Anita Afzali and Dr. Aline Charabaty describe a vision for this organization as follows: “to move the field of GI to an environment where women are heard, encouraged, promoted and amplified, an environment where women feel empowered to advocate for themselves, their goals and their vision . . . ” The mission of Scrubs & Heels is to facilitate the provision of leadership skills and career advancement tools for women to achieve professional success in the field of Gastroenterology and beyond.

The agenda for this second Leadership Summit was excellent: http://scrubsandheels.com/event/scrubs-heels-summit-2022. Two days of inspiring didactic talks and break-out sessions led by a faculty of primarily adult GI colleagues addressing many practical and networking resources applicable to those in academic or private practice, industry or research, health policies organizations, and other private initiatives. Themes of negotiation skills, professional branding, organization management, effective networking, executive and financial coaching were insightful and provocative. These topics are certainly pertinent to both male and female members. Dr. Marla Dubinsky (NASPGHAN member) was the Keynote Speaker, giving a most inspiring talk about creating one’s own company with purpose and innovation, sharing many personal and empowering insights from her lens as a CEO. A bonus was a dinner reception with author Sally Helgensen talking about her book How Women Rise. A highly recommended near future read!

Leaders representing the American College of Gastroenterology (ACG), World Gastroenterology Organization (WGO), American Gastroenterology Association (AGA) and the American Society for Gastrointestinal Endoscopy (ASGE) attended this year. At the start of the summit, most attendees were unaware of NASPGHAN, let alone even say “NASPGHAN”! By the end of the 2 days, NASPGHAN was a familiar name for all 2023 faculty and most attendees 😊.

The Matrix Mentorship Program is a key aspect of Scrubs and Heels that we feel would be beneficial to our members. Selected mentees are provided with mentorship, sponsorship, as well as professional coaching during the course of one year, and engage with leaders from academia and private practice, women in GI and male allies, and a professional coach. The carefully selected mentorship committee aim to help mentees define their career goals and design a roadmap to reach near and intermediate professional and personal goals and growth. The ultimate goal of the matrix mentorship program is to foster long-lasting relationships between mentors and mentees beyond the completion of this program, so mentees continue to gain valuable guidance and career advice from their mentors throughout their GI journey. We encourage our female NASPGHAN colleagues to consider putting in a Mentee Application for the 2024 program.

We look forward to welcoming both Anita and Aline to our 2023 Annual Meeting in San Diego. Join us and meet them at the Saturday Meet-the-Professor Breakfast (Women in Medicine) as well as the Professional Development Concurrent Session. Last and certainly not least, the dates for the S&H 2024 Summit is now out — April 12-14, 2024. Check it out!

Baby Shark Tank Returns to NASPGHAN: Apply Now!

Have a great idea for a medical device that could change our field?

Apply for the SECOND annual NASPGHAN Baby Shark Tank competition from 4-5 PM Thursday, October 5th!

Whether you have a concept and plan sketched on a napkin or an early-stage company, NASPGHAN encourages you to apply. The top proposals will be selected to pitch in front of an expert panel of Sharks on Thursday, October 5th during the NASPGHAN Annual Meeting.

The Baby Shark Tank winner will receive a monetary award, promotion throughout the GI community, support to attend the AGA Shark Tank Competition and invaluable bragging rights.

Any and all are welcome to apply. The application site is open and applications are due by Saturday, July 15.

For more information on the NASPGHAN Baby Shark Tank please contact Ankur Chugh (achugh@mcw.edu) or John Rosen (jmrosen@cmh.edu).
SEE YOU AT THE 2023 ANNUAL MEETING!

OCTOBER 4 – 7, 2023
HILTON SAN DIEGO BAYFRONT • 1 PARK BLVD • SAN DIEGO, CA 92101

Detailed information available online here You can register now. Registration opened June 1 with Early bird rates available until August 31.

The schedule for this year includes:

- **Wednesday, October 4 — Single Topic Symposium: Polyps Matter: Pediatric Polyposis and GI Cancer Syndromes**
  Led by Course Director, Thomas M. Attard, MD and his planning committee, this one-day event will bring together clinicians and researchers across pediatric gastroenterology, hepatology, and nutrition, with the addition this year of input from genetic counselors, to increase knowledge and standard of care around Polyposis Syndrome and GI Cancer Syndromes.

- **Thursday, October 5 — Postgraduate Course**
  Another great year of education assembled by the Professional Education Committee with Course directors: Toba Weinstein, MD and Maria Perez, DO. This year Learning Lunches return to the Postgraduate Course to add even more depth to this opportunity.

- **Thursday, October 5—Saturday October 7 — NASPGHAN /CPNP/APGNN Annual Meeting**
  The most diverse and collaborative schedule of sessions to be hosted. Kicked off with a keynote presentation by Reshma Jagsi, MD, DPhil, Emory School of Medicine on Promoting Equity in Academic Medicine: An Evidence-Based Approach and capped off with NASPGHAN’s New Era Celebration on Saturday night at Prado at Balboa Park, you won’t want to miss a second of what is being offered.

All of this being offer with a beautiful view of the water and access to hundreds of dining, shopping and entertainment venues within walking distance or a quick cab ride. Join us in San Diego this October!

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2023 NASPGHAN ANNUAL MEETING ADVERTISING PACKAGE

Publicize your job openings at the NASPGHAN Annual Meeting October 4-7, 2023 in San Diego, CA as well on the NASPGHAN electronic Job Board.

With a specially-priced package, which is now available on the NASPGHAN website, you can receive a job posting on NASPGHAN’s electronic Job Board and a discount on NASPGHAN’s 2023 Annual Meeting job board, which will be available on a meeting app that will be used by all attendees at the Annual Meeting.

You can post an ad or get further details about the package by going to the Job Board. This is a limited time discount offer, with a deadline of late September.

Please contact Kim Rose, Associate Director, NASPGHAN, with any questions. 215-641-9800 or (krose@naspghan.org).
The Pediatric GI Teaching and Tomorrow Program of the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN), which is held during the society’s annual fall educational meeting, strives to attract stellar residents to consider subspecialty training in pediatric gastroenterology, hepatology, and nutrition. All participants in Teaching and Tomorrow attend three tailored career panel discussions/sessions in addition to a popular social networking reception where they are invited as a group to meet with current fellows, as well as program director representatives from most GI fellowship programs in North America.

In its commitment to being as diverse, equitable and inclusive a society as possible and in recognition of the power of the Teaching and Tomorrow Program to bring promising pediatric residents of all races, ethnicities, genders, and social backgrounds from throughout North America, NASPGHAN has created the Teaching and Tomorrow URiM program. The Teaching and Tomorrow URiM Program has been expanded to offering 15 scholarships to interested first and second year pediatric residents and fourth year medical students who self-identify as Underrepresented in Medicine (URiM). In addition to networking with other participants while attending the program’s scheduled sessions, scholarship awardees will be matched with a NASPGHAN fellow and/or attending physician (often themselves a Teaching and Tomorrow Program alumnus) who will serve as an additional professional contact and NASPGHAN ambassador. The 2023 Teaching and Tomorrow program begins October 5 and concludes October 7 and is being held in San Diego, CA.

Applications are now being accepted for the URiM Teaching and Tomorrow program. The deadline for applications is August 1, 2023.  
Submit your application here.

Supported by educational grants from Takeda Pharmaceuticals, Children’s Hospital of Philadelphia and Functional Formularies.

Happy Summer, NASPGHAN!

We’ve been busy!

Our podcast, “Nutrition Pearls”, is now available with new episodes monthly here. Each episode highlights a different CPNP member sharing their expertise on a variety of nutrition topics. We have excellent guests both in the archives and pending release. I’m continually impressed with the experience and range of CPNP members! Special thanks to our RD hosts, Jen Smith, Megan Murphy, Bailey Koch, and Melissa Talley — not only nutrition experts, but now podcasting production experts as well! Also, shout out to Peter Lu and the Bowel Sounds team for their mentorship!

I am also happy to report that we collaborated with NASPGHAN on another successful N2U. We had a record number of applicants and an impressive 8 RDs on the faculty! We also formed a team of blenderized tube feeding experts that is busy creating educational content for GIKids.org. Lastly, our Annual Meeting agenda is shaping up nicely! Topics include lactation, allergy, the AAP obesity guidelines, and culinary medicine. Attendees will also get hands-on experience with enteral and parenteral feeding devices.

Our inbox is active with abstract submissions, CPNP grant proposals, Dietitian of Excellence Award nominations, and Executive Committee nominations rolling in.

I am proud to serve a community that is always buzzing with activity!

Sincerely,

Abigail Lundin, MS, RD  
CPNP President

Abigail Lundin, CPNP President
Dear NASPGHAN Members,

I hope this update from the Association of Pediatric Gastroenterology and Nutrition Nurses (APGNN) finds you well as we begin to enter the summer months. The APGNN Board has been busy planning the upcoming 2023 Annual Meeting and we are excited to share our agenda with members and attendees. We were fortunate to attend the NASPGHAN planning program in January, followed by our APGNN Board Retreat in Nashville one week later. During this meeting, our board focused on finalizing the program sessions and prioritizing the goals for APGNN in the coming years with a focus on member retention and member-only benefits.

For the Annual Meeting, we have a dynamic agenda with a mix of nurses, nurse practitioners, dietitians, psychologists, and physicians speaking on topics ranging from biomarkers in Disorders of gut-brain interaction, PFIC, extraintestinal manifestations of IBD, treatment adherence in the asymptotic patient, and more. We have also received wonderful feedback on last year’s Intestinal Rehabilitation session so will dedicate a full session to IR again this year. As always, we will be offering several Awards during the Annual Meeting including the Excellence in Education Award, New Member Scholarship, Poster of Distinction Award, Excellence in Mentoring Award, and the Sue Peck Excellence in Nursing Practice Award. Please encourage your institution’s team members to apply! The Susan Moyer NASPGHAN Foundation Research Grant is also available, and we are so appreciative of the Foundation’s support in the promotion of nursing research.

The Pediatric Gastroenterology Nursing Assessment-Based Certificate Program continues to be a primary focus of the organization and is receiving positive evaluations. Many institutions have purchased the modules for staff, and it has served as a wonderful onboarding program for newly hired nurses/providers. As a reminder, discounts are available to APGNN, NASPGHAN, and CPNP members as well as institutions looking to purchase multiple bundles.

Membership recruitment and retention has also been at the forefront of our work this year. We have developed membership renewal incentives in January and May to encourage timely dues payment, with paid members eligible for discounted registration for the Annual Meeting. New membership perks for 2023 will include the development of a Subject Matter Expert (SME) Resource list. We will be shifting our current Mentorship Program to this model, which will create a more versatile and accessible network. Our goal is for APGNN SMEs to be available for individual outreach to support members with specific questions/mentoring. Lastly, this March APGNN launched its first “Meet the Board” Zoom calls. We held three one-hour informal Zoom chats for members to come ask clinical questions, learn about the organization, and consider committee/board positions. While the turnout was low, the discussion quality was excellent, and we will repeat this offering next year.

APGNN is proud to offer the Clinical Handbook of Pediatric Gastroenterology, currently on its 3rd edition. This has been a useful pocket reference for a variety of providers in the field of Pediatric GI. The 4th edition is set for 2024 and we are currently pursuing an educational grant to support the publication. We are very excited to announce that our goal is to offer this new edition in both hard copy and electronic version. Stay tuned!

On behalf of APGNN, thank you for your continued support and engagement. The NASPGHAN leadership and Executive Office has embraced APGNN each year, and we are so appreciative of the collaboration. We look forward to seeing everyone in person in San Diego!

Warm Regards,

Elizabeth Burch, MSN, RN, CPNP-PC, APRN III
APGNN President
Digestive Disease Week was in early May with an in-person event again this year. Many NASPGHAN members attended DDW 2023 held in the Windy City. A very special NASPGHAN reception in the Palmer House Grand Ballroom on Sunday, May 4 also attracted many of the society members who lingered until the very end.
Committee & Special Interest Group Reports

NUTRITION COMMITTEE

Chair: Debora Duro, MD, MS

The Nutrition Committee remains a strong and active committee with 39 active members plus participation by the Intestinal Failure Special Interest Group (SIG) and the Council for Pediatric Nutrition Professionals (CPNP). Committee members meet virtually every month and have created three working groups tackling designated projects in Medical Education, Culinary Medicine and Food as Medicine. These 3 sub-groups are working on important nutrition aspects and developing instrumental learning models, webinars and writing review papers in the field of nutrition. The entire committee meets every 2-3 months to work together on any assignments designated by the NASPGHAN leadership such as reviewing Foundation grants, highlighting aspects of childhood nutrition that need advocacy and any nutrition related topic of relevancy for our society.

On April 14th and 15th 2023 the Nutrition Committee had the 12th annual NASPGHAN Nutrition University (N²U), which was held in person with 40 participants made up of 20 third-year fellows, 10 junior faculty and 10 registered dietitians (see accompanying pictures at right). It was a successful meeting, thanks to the amazing faculty with their endurance and invaluable expertise making N²U a vital source to learn and share up-to-date topics on nutrition. Participants strongly agreed that this program is very relevant to their work. Thank you to the engaging faculty: Florencia Brioni, MS, RD; Julia Caron, RD; Alison Cassin, MS, RD, CSP, LD; Valeria Cohran, MD; Sarah Fleet, MD; Kirsten Jones, RD, CSP, LD; Tegan Medico, MS, MPH, RDN, CNCS; Ann Scheimann, MD, MBA; Maria Mascarenhas, MBBS; Jill Rockwell, RD, CSP, LD, CNCS, CCTD; Sharon Weston, RMS, RD, LD; Robert J. Shulman, MD; Justine Turner, MBBS, FRACP, PhD, and Sally Schwartz RD, CSP, LDN. A big acknowledgment also goes to the CME reviewers, Margaret Stallings, Laura Smith, Debra Burrowes, and the other supportive staff at our NASPGHAN office for their tremendous behind-the-scenes preparatory work involved in successfully organizing this event.

Nevertheless, N²U is only possible because of the ongoing and solid support from our NASPGHAN Foundation and Nutricia North America, a special thank you and gratitude to them.

We look forward for a great year ahead and for our NASPGHAN 51st Anniversary at the 2023 Annual Meeting in October in San Diego, California.

The 12th annual Nutrition University offered 40 participants two days of intense nutrition training. It was held in Chicago on April 14 and 15.
Hello to all NASPGHAN members! We are looking forward to seeing everyone in October in San Diego, CA for the NASPGHAN Annual Meeting. The NASPGHAN Committees have been keeping us busy (in a good way!) with Societal Paper proposals. It is a duty to NASPGHAN we are honored to be a part of and we have been making several changes over the past year to improve the review process. We have launched an online platform for submission of NASPGHAN Societal Papers (see story at right). We hope this will streamline the process for author groups and, this summer, we are forming a taskforce to review the process and the Manual of Operations. We have also had the chance to review proposals related to the role of therapeutic drug monitoring in pediatric patients with inflammatory bowel disease and health care maintenance and transition of care in pediatric patients with pancreatitis. We are excited for members of NASPGHAN to be able to access these documents in the future, upon publication in JPGN.

We have three highly active special interest groups (SIGs) in CCQ: Celiac SIG, Integrative Medicine SIG, Eosinophilic Gastrointestinal Disorders (EGID) SIG, Jocelyn Silvester, MD, and Ed Hoffenberg, MD lead the Celiac SIG, and are currently working on a letter to the editor in regards to the recommendations from the recent American College of Gastroenterology's guidelines supporting non-biopsy diagnosis of celiac disease in children. They are also drafting and submitting a clinician's guide to performing a gluten challenge. The Integrative Medicine SIG, which is led by Alexa Russell, MD (Chair), Ashish Chogle, MD (Vice Chair), and Neha R. Santucci, MD (Vice Chair), published 2 collaborative review papers entitled “Herbal Approaches to Pediatric Functional Abdominal Pain” and “Clinical Hypnosis for Pediatric Gastrointestinal Disorders: A Practical Guide for Clinicians.” In addition, Drs. Ann Ming Yeh and Rachel Borlack held in-person and virtual teaching sessions on the use and employment of auricular acupressure for pediatric GI conditions. They are also drafting a publication related to mixing practices for budesonide slurry for treatment of eosinophilic esophagitis and have a survey circulating about innovations in technology in EGID.

We also work to create new content out of the CCQ Committee that spans across the practice of pediatric gastroenterology. Our joint NASPGHAN Position Paper with CPNP about the role of the dietitian in pediatric GI disorders was recently published in the March 2023 issue of JPGN. We also have three working groups, each with a unique project of their own, and we are excited to see these evolve over the next year.

2023 has been a fun and productive year thus far, and look forward to what the rest of the year holds for our Committee!

The submission of proposals for NASPGHAN societal papers, which includes Position Papers and Clinical Guidelines, can now be done entirely online.

The NASPGHAN Clinical Care and Quality Committee, which oversees the societal paper process, has designed a new online procedure for submitting societal paper proposals. The proposal requirements remain the same.

Jon Moses, MD, chair of the Clinical Care and Quality Committee, and Joe Picoraro, MD, vice chair of the committee, designed the online submission to improve and streamline the societal paper proposal process.

The new platform is accessible now under the heading “NASPGHAN Societal Paper Submission”. Use the same user name and password that you use when accessing the NASPGHAN member center to access the submission site. Please send feedback to Kim Rose (krose@nasphgan.org) with any comments, issues, or questions.

Look at the new and improved Inflammatory Bowel Disease (IBD) information on the GIKids.org website!

This project was a labor of love started a year ago by the NASPGHAN IBD Committee led by Brad Pasternak, MD and overseen by Jeremy Adler, MD. The group extends a special thanks to Joanna Niklinska-Schirtz, MD, and Bhaskar Gurram, MD, for their invaluable contributions to the content.

The NASPGHAN IBD Committee points to the IBD resource as providing families with the most up-to-date and comprehensive information to help manage this challenging disease.
The Hepatology Committee has been active since its last in person meeting at NASPGHAN in October 2022. I am happy to announce we have a new Vice Chair, Amal Aquil. Amal is the medical director of pediatric hepatology and liver transplantation at University of Texas Medical Center in Dallas (UTSW).

We have continued to collaborate with colleagues across the globe, the WHO, CDC and AASLD on the outbreak of severe acute hepatitis in children. The AASLD-NASPGHAN symposium will have a special session focused on the science with globally renowned leaders.

We have had a successful four-part webinar series that is available online which started with the diagnosis of children with cholestatic liver disease, followed by nutrition and then pruritus management. Please join us for the final webinar in this series, where we will focus on indications for liver transplantation in these patients.

Our next educational venture will be to develop a two-day Hepatology Academy to provide trainees and early career faculty with opportunities to learn and network with leaders in the field. This is a work in progress and we will be seeking input from our members so please stay tuned.

Over the next year we look forward to putting on more educational offerings and promoting collaboration between our community. If you have an interest in hepatology, please consider joining us and if you have an idea for a webinar or believe we should cover a subject area please contact myself or Amal and we would be happy to consider it at our next meeting.

We hope you have a good summer and look forward to meeting everyone in San Diego.

Welcome New 2023 NASPGHAN Members

- Jose Cadena
- Shayna Coburn
- Dominica Gidrewicz
- Amy Hale
- Karen Rubi Ignorosa Arellano
- Bradley Jerson
- Brent Keith
- Katherine McGoogan
- Emilia Shin
- Jason Soden
- Boris Sudel
- Jessica Valenzuela
- Flora Zarate

2023 NASPGHAN, APGNN, CPNP DIRECTORIES NOW AVAILABLE ONLINE

The 2023 annual NASPGHAN, APGNN and CPNP membership directories are now available as pdf files on the NASPGHAN website in the members only section.

Members can also search for other NASPGHAN members in the Member Center Members Only Member Search Directory, which reflects the live membership database and current information for each member. It is searchable by name as well as location. Use your NASPGHAN username and password to access the Member Center.
The NASPGHAN—Abbott First-Year Fellows Conference was held at the Rosen Plaza Hotel in Orlando, Florida from January 19-22, 2023. This year marked the 21st year of this conference. More than 140 fellows from the United States, Canada and Mexico participated in this dynamic conference.

The conference provided the first-year fellows exposure to multiple aspects of pediatric gastroenterology, including the mentor/mentee relationship, maximizing scholarly/research time during fellowship, fostering resilience throughout training and beyond, as well as a dedicated portion of the meeting to discuss ways to promote diversity, equity and inclusion in the pediatric gastroenterology field. Lectures ranged from “Developing Your Research Project” to “How to Choose a Mentor/Optimizing Your Experience as a Mentee” to “Learn from Our Mistakes: Optimize Your Fellowship Years” to “We don’t talk about Bruno/Burnout” to “Emotional Intelligence” among others. Each series of lectures were followed by open panel discussions in which faculty discussed their individual career pathways, including their successes and failures. Small group sessions were held each day covering a variety of topics to help foster career exploration and further growth in the areas of time management, financial wellness, allyship, conflict resolution and overcoming imposter syndrome. Evening activities included the now famous GI Jeopardy, karaoke night and ended with faculty and fellows dance party lasting late into the night (led by Dr. Norberto Rodriguez-Baez)!

Making this conference possible was a fantastic group of faculty with diverse clinical and research interests: Drs. Elizabeth Mileti (Course Co-Director), Ed de Zoeten (Course Co-Director), Jenifer Lightdale (NASPGHAN President), Danny Mallon (NASPGHAN Training Committee Chair), Niviann Blondet, Jose Cabrera, Conrad Cole, Jennifer Colombo, Ericka Montijo-Barrios, Paula Prieto (Fellows Committee Chair), Jason Silverman, Menno Verhave (NASPGHAN Foundation Past President), Karyn Wulf (Abbott – Medical Director) and Desalegn Yacob.

This conference, which began in 2002, continues due to the generous support of Abbott (Donnie Michel), guidance and support by Margaret Stallings (NASPGHAN Executive Director), and the incredible conference planning by Howard Wise (CTP Group). This conference has been instrumental in the development of lasting professional relationships within the field of pediatric gastroenterology as well as fostering early career development.
Abbott supported the NASPGHAN Second-Year Fellows Conference, which took place April 27—April 30 in Miami, Florida. While usually held in Arizona, scheduling conflicts had NASPGHAN making this fun change to a new locale for the year! The conference continued to provide our second-year pediatric GI Fellows from across North America with the opportunity to meet and network with faculty and their co-fellows.

Fellows participated in a curriculum focused on career development, including sessions on how to apply, prepare and interview for a job, work/life integration, multiple faculty panels, and small groups discussing different career paths. In what has become a fellows conference tradition, the programming was highlighted by a moving faculty panel where they shared personal and professional challenges they faced and overcame. Our faculty included fourteen diverse, enthusiastic, and accomplished individuals who share a common passion for teaching and mentoring the future of our amazing organization.

Special thanks to Donnie Michel and Abbott for supporting this successful meeting for another great year, including our Miami Vice night! Our faculty showed what they were made of and dressed to impress for the themed occasion. We are so thankful to the 2023 faculty without whom this meeting could not have happened: Danny Mallon (Training Committee Chair), Eric Benchimol, Rosalyn Diaz, Christine Lee, Jose Garza, Ben Gold, Kathy Loomes, Vince Mukkada, Travis Piester, Ann Scheimann, Jennifer Strople and Kevin Watson.

Last but NOT least, this annual conference would never happen without the ever-present dedication, energy, hard work, and unwavering support of Margaret Stallings, Laura Smith, and the NASPGHAN office.
Below are their reports and updates. It is exciting to see how JPGN continues to evolve and grow — so much has already happened this year! Much of what you see is due to the incredible hard-work of our Associate and Section Editors (visit here to see our team). Below are their reports and updates.

Darla Shores, MD — Section Editor, Invited Topics
Topic of the Month: With our updated format and wider author pool, we’ve had a significant increase in submissions. We are grateful to our GI community for their suggestions and submissions of impactful, hot topics. As a reminder, Topic of the Month contains focused reviews that encompass Clinical Care, Practice Management, or Medical Education/Career Development. The topics are narrower in scope, highlighting expertise, important subtopics, and the art of medical wisdom and career development. We are looking for high yield, practical topics that are ready to be implemented into practice and with a reasonably quick submission timeline. We encourage fellows and junior faculty to work alongside senior faculty/experts in writing the manuscripts. Please note the instructions for no more than 1500 words, 5 authors and 12 references.

We also publish Invited Reviews which continue to be broader in scope and provide more in-depth coverage of topics.

Please contact me at (dshores1@jhmi.edu) with ideas and suggested authors for both Topic of the Month and Invited Reviews. Feel free to self-volunteer.

Jeannie Huang, MD, MPH — Associate Editor
Visual highlights provide authors with an additional platform to publicize their work and underscore important contributions to the field of pediatric gastroenterology, hepatology, and nutrition. Please reach out to me at (jshuang@ucsd.edu) if you have any questions and/or for guidance as authors create their visual highlight.

Additionally, we welcome you to the Meet the Editor breakfast at the NASPGHAN 2023 Annual Meeting — a moderated session between NASPGHAN members and journal contributors, and the editors of both JPGN and JPGN Reports. At the session, we will discuss several topics of interest to our community in an interactive format.

Susan Baker, MD, PhD — Associate Editor
Since the appointment of Huiping Xu, PhD, Associate Professor of Biostatistics and Health Data Science at Indiana University School of Medicine as the first ever Biostatistics Section Editor at JPGN, the journal has been able to better assure that manuscripts are of the highest quality and that the statistical analyses support the data presentation and conclusions. Dr. Xu has been able to review questions raised about statistical analysis by reviewers and editors alike in an efficient and timely manner, thus assuring that authors have access to this important review and their manuscripts are returned to them for revision, if necessary, promptly.

Cheryl Gariepy, MD — Conflict of Interest Consulting Section Editor
There have been important changes to the Consulting Editor work-flow. The Consulting Editor handles reviews of certain submissions and other editorial conflicts of interest, including manuscripts from authors that may present a conflict of interest for the Editorial Team. Originally, the NASPGHAN Consulting Editor would manage manuscripts from the ESPGHAN Editorial Team while the ESPGHAN Consulting Editor would handle manuscripts from the NASPGHAN Editorial Team; the Consulting Editors were tasked with finding reviewers from the region of origin of the manuscript.

This proved to be a significant challenge; finding reviewers is often difficult as is, and I was assigned European manuscripts on subjects outside my sub-field of expertise and needed to identify European experts on these topics who would agree to review. This resulted in challenges at multiple levels. In the past year, the NASPGHAN and ESPGHAN Editors modified the process and now most manuscripts with a potential conflict of interest stay within the respective office. This has allowed me to identify wonderful, thoughtful reviewers much faster and I thank all of you who review for JPGN.

Jim Squires, MD — Associate Editor
The Fellow Reviewer Program was launched in 2021 and was open to 3rd and 4th year fellows. Due to the program’s success, we have expanded to now include 2nd year fellows too. This program aims to provide fellows with reviewer experience, give credits to fellows for reviewing (looks good on a CV!), increase mentorship opportunities between faculty and fellows within the society, obtain a larger reviewer pool for the journal, and assure the future of the reviewer pool for the journal. Below is a schema of how this program works and we request the programs encourage their fellows to apply for this unique learning opportunity.

Nitika Gupta, MD — Associate Editor
The JPGN Editorial Board, the NASPGHAN Council and the NASPGHAN Professional Development Committee continue their
exciting partnership—the Committee Reviewer Program. The goal of this program is to increase engagement and collaboration between NASPGHAN committees and JPGN. Each committee member is expected to review at least two manuscripts per year as part of their committee service. JPGN looks forward to increased engagement with the NASPGHAN committees and we request all committee members to actively sign up as JPGN Reviewers by sending an email to Marianna Hagan at (jpgn@wolterskluwer.com).

Joseph Croffie, MD MPH — Associate Editor

We continue to appreciate all our colleagues who volunteer their invaluable time to review manuscripts for the journal. We encourage all NASPGHAN members to volunteer to be reviewers to help improve the quality of our journal. We hope to recognize top reviewers again this year at the NASPGHAN Annual Meeting with special ribbons and a certificate of appreciation. We are grateful for the top reviewers for 2022: Drs. Eric Benchimol, Robert Baker, Jaime Belkind-Gerson, David Dunkin, Khalil El-Chamas, Alka Goyal, Richard Kellermayer, Jonathan Moses, Hayat Mousa, Steven Schwarz, Timothy Sentongo, Darla Shores, Steven Steiner and Charles Vanderpool. Thank you for your invaluable contributions to JPGN.

Jason Silverman, MD — Social Media Editor

JPGN continues to have a significant social media presence. As of April 2023, the journal has >7,500 followers on Facebook and >3,200 followers on Twitter. While activity on Twitter has decreased somewhat during the past 6 months, likely due to user uncertainty, it continues to be a very important venue for reader engagement. We are actively evaluating the possibility of expanding our social footprint to include other social media platforms. Stay tuned!

In addition to the many wonderful things above, we hope you are following us on Facebook and Twitter.

In conclusion, we hope you have noticed the many changes to JPGN including the QR codes in the Table of Contents, the Infographics and visual highlights embedded within the articles, and Quick poll self-assessment questions on (www.jpgn.org).

Please do reach out to any of us with your ideas, thoughts, suggestions and feedback — we look forward to hearing from you.

Sandeep K. Gupta MD
JPGN Editor-in-Chief, Western Hemisphere
(skgupta@uabmc.edu)

Congratulations to Sanjiv “Sonny” Harpavat, MD, PhD, FAAP (Texas Children’s Hospital/Baylor College of Medicine) and Hannibal Person, MD, FAAP (Seattle Children’s/University of Washington) who were recently elected to serve on the SOGHN Executive Committee with terms beginning November 1, 2023. Sonny, who is already a member of the Executive Council, will serve as the new Chair.

I am also delighted to introduce our new Section Manager, Pia Daniels, MPH, PMP. While Pia is new to us, she is an experienced AAP staffer and was the Program Manager of Evidence-Based Medicine Initiatives. In this role, she was responsible for the recent Clinical Practice Guideline on Obesity. We are very fortunate to have her experience, know-how and organizational skills! We wish Debra Burrowes, our long time Section Manager, the best. She served us with grace, poise and wisdom and is now using her talents at the NASPGHAN Foundation!

We have partnered with the NASPGHAN Foundation to award grants to 2 AAP Chapters (New York and Maryland) to share information on Hepatitis C. This follows on our successful AAP Chapter Speaker Program, which has awarded annual grants to deliver content on common GI conditions at local annual continuing medical education forums. We have also partnered with NASPGHAN at the federal level to advocate for insurance coverage of medical nutrition. Our new Choosing Wisely campaign offers advice to Primary Care Physicians on testing for celiac disease, management of chronic constipation, stool testing for fecal leukocytes and C. difficile and blood tests for food allergies.

We currently have 813 SOGHN members. In both NASPGHAN and the AAP, we are united in our pursuit of outstanding care (and health) for children with GI (nutrition, liver, pancreas, motility, etc.) diseases. In addition, we in the SOGHN believe that there are also opportunities to collaborate to advance broader goals in health equity and to partner with primary care physicians and other subspecialists around child health and disease management. Please ask your colleagues if they are members of the AAP and invite them to join us in these endeavors.

For more information or to volunteer for a committee role in the SOGHN, please contact Pia Daniels, at (pdaniels@aap.org).

Mitch Cohen, MD, FAAP
Chair, AAP Section on Gastroenterology, Hepatology & Nutrition
(mcohen@peds.uab.edu)
JPGN REPORTS

News from the Editor
Sandeep Gupta, MD
Western Hemisphere, JPGN Reports

JPGN Reports continues its trajectory of solid growth and we are delighted to announce JPGN Reports has been approved to be indexed by PubMed Central (PMC) and is online as of May 2023. This is truly a labor of love of many individuals, especially Mel Heyman, MD, MPH (former Editor in Chief of JPGN Reports Western Hemisphere) and Renata Aurrichio, MD, PhD (Editor overseeing JPGN Reports for Eastern Hemisphere), and our team from Wolters-Kluwer including Ali Gavenda, and our Managing Editors Phyllis Barr and Marianna Hagan. We are grateful to Margaret Stallings and her exceptional team.

To be indexed by PMC within 3 years of being launched is an incredible and unique achievement and speaks to the vision and dedication of many individuals in both offices, including Mel Heyman at NASPGHAN. We hope you will continue to submit your novel case-reports to JPGN Reports. In addition, we welcome select original articles, short communications, methods and protocols, images/videos and commentaries. We are enhancing bi-directionality of communications between the editorial teams of JPGN and JPGN Reports to foster appropriate publication venues.

Indexing of a journal in reputed databases such as PMC not only enhances the credibility of the journal but also allows the publications to be search-able in PMC along with, over time, generation of an impact factor for the journal. We are excited to inform that the indexing of publications in JPGN Reports will be retroactive to August 2020 when the first issue was published — this is a positive for our authors.

In addition to this exciting news, are updates from members of our editorial team.

Sabina Ali, MD — Associate Editor
JPGN Reports is launching its first ever “Fellow-Editor Program”. The Fellow-Editor Program is an opportunity for Advanced fellows (3rd and 4th year) interested in pursuing an editorial role in medical publishing to be mentored by a JPGN Reports Associate Editor. This is a 12-month program in which the Fellow-Editor shall work remotely with an assigned Associate Editor to learn about and be involved in the editorial processes. The program will also offer an introduction to the journal’s production and post-publication activities. This is a great opportunity to network and gain knowledgeable skills in workings of a medical journal. Application Deadline: Mid-June of each year. Start date: 1st week of August of each year.

Veronique Morinville, MD — Associate Editor
JPGN Reports is aiming to expand the breadth of pancreatology topics within its published content. This would include manuscripts involving pancreas physiology, acute/ acute recurrent/ chronic pancreatitis, exocrine pancreatic function/ insufficiency, pancreatic masses and cysts, and cystic fibrosis. I would strongly encourage submission of pertinent case reports, study protocols/methods, and similar selected works that involve the realm of pediatric pancreatology. In particular, case reports are a wonderful opportunity to involve trainees in the publication process, and I would urge teaching faculty to be on the lookout for interesting pancreatology cases with clinical teaching points that could benefit our readership. Please feel free to reach out to me with any questions, comments, or suggestions at (veronique.morinville@mcgill.ca).

David Galloway, MD — Associate Editor
I am honored to join a tremendous group of editors at JPGN Reports and build on previous efforts to expand the nutrition aspect of the journal. As we embark on another chapter of growth, we welcome manuscripts that would help facilitate learning for both trainees and faculty on the many important aspects of nutrition in our field. Helpful topics include feeding difficulties among infants, toddlers and older children, nutrient deficiencies, best practices for feeding modalities and substrate use, congenital disorders involving nutrient absorption, metabolism, etc. Please reach out to me at any time with your ideas, questions, and concerns. You can email me directly at (dpgalloway@uabmc.edu).

Natasha Cavalcante, BA, and Rajitha Venkatesh, MD — Social Media Section Editors
After 2 years, JPGN Reports social media presence has achieved considerable awareness in the Pediatric GI community. We as the Social Media Section Editors are working on creating engagement and dialogue — and we invite you to be part of it! If you haven’t connected with JPGN Reports on social media yet, head to twitter and facebook. We look forward to promoting your work once accepted to the Journal.

Please do reach-out to any of our editors or me if we may be of service to you — we look forward to your ideas and suggestions as we grow JPGN Reports.

Sandeep K. Gupta MD
JPGN Reports Editor-in-Chief, Western Hemisphere
(skgupta@uabmc.edu)
Billing & Coding


OBSERVATION CARE UPDATE

Observation Codes

- For dates of service prior to January 1, observation services are billed by the admitting physician using:
  - Initial observation care: 99218-99220
  - Subsequent observation care: 99224-99226
  - Discharge: 99217

- For service on and after January 1, observation services are billed by the admitting physician using:
  - Initial hospital inpatient or observation care: 99221-99223
  - Subsequent hospital inpatient or observation care: 99231-99233
  - Hospital Inpatient or Observation Care Services (Including Admission and Discharge Services): 99234-99239
  - Hospital Inpatient or Observation Discharge Services: 99238-99239

- All other physicians billing:
  - Observation care codes are billed only by the admitting physician. All other practitioners providing care to patients receiving observation services bill office and other outpatient visits, codes 99202-99205 or 99211-99215. New vs. established patient rules apply.

PUBLIC HEALTH EMERGENCY

- Check the list of telehealth services to see what Medicare will cover this year. You will have plenty of warning before Medicare makes changes to the approved telehealth services list. They will address updates to the telehealth list through the CY Medicare Physician fee schedule. Remember that this is CMS and commercial policies may differ.

### CIGNA AND MODIFIER 25

- Notification: Effective 05/25/2023 Cigna will require the submission of documentation to support the use of modifier 25 when billed with E/M CPT® codes 99212 – 99215 and a minor procedure.
- In general, reimbursement for evaluation and management services on the same day a procedure is also performed by the same physician is included in the payment for the procedure. The E/M service code should not be separately reported. In some circumstances, a significant E/M service is rendered that is separately identifiable from the procedure performed in the same session. The separate E/M service must be significant enough to require a separate service, i.e., address a new or distinct problem.
- Modifier 25 usage Modifier 25 was created to identify this situation and to indicate that it is appropriate to separately report the E/M service in addition to the procedure. Modifier 25 is used to indicate that on the day a procedure was performed, the patient’s condition required a significant, separately identifiable E/M service above and beyond the other service provided.
- The necessity for an independent E/M service may be prompted by a complaint, symptom, condition, problem, or circumstance that may or may not be related to the procedure performed by the same provider on the same date of service. As such, it is not necessary to present diagnoses different from those related to the procedure to report a significant, separately identifiable E/M service.
- When a procedure is performed as a follow-up service or is scheduled as the primary reason for a patient encounter, reporting an E/M service is only warranted if a significant, separately identifiable condition arises or a new problem is identified.
- When the disallowed code is an E/M CPT® code, with modifier 25, and a minor procedure the documentation should demonstrate the E/M is significant and separately identifiable. CMS defines a minor procedure with a global day of 000 and 010. “In general, E/M services on the same date of service as the minor surgical procedure are included in the payment for the procedure. The decision to perform a minor surgical procedure is included in the payment for the minor surgical procedure and shall not be reported separately as an E/M service. However, a significant and separately identifiable E/M service unrelated to the decision to perform the minor surgical procedure is separately reportable with modifier 25. The E/M service and minor surgical procedure do not require different diagnoses.” CMS identifies the global days on the National Physician Fee Schedule Relative Value File. CMS updates the file multiple times throughout the current year which can result in the reassigning of the global days.

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<tr>
<th>PHE Waiver/Flexibility</th>
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<tr>
<td>99211 for COVID specimen collection (new patients)</td>
<td>5/11/23</td>
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<td>HIPAA Enforcement</td>
<td>5/11/23</td>
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<td>Remote physiologic monitoring (new patients)</td>
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<td>Virtual Check-ins (new patients)</td>
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<td>Visit frequency limit</td>
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<td>Direct supervision via audio/video connection</td>
<td>12/31/23</td>
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<td>Payment for in home COVID vaccine</td>
<td>12/31/23</td>
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<td>Telehealth from provider’s home</td>
<td>12/31/23</td>
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<tr>
<td>Audio-only exception for certain telehealth services</td>
<td>12/31/24</td>
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<tr>
<td>Patients can receive telehealth at home</td>
<td>12/31/24</td>
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<td>Payment for telephone visits equal to in-person visits</td>
<td>12/31/24</td>
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<tr>
<td>Telephone visit coverage (99441-99443)</td>
<td>12/31/24</td>
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EXAMPLES OF INCORRECT USE OF MODIFIER 25

- Appending modifier 25 to a CPT or HCPCS service code that is not an Evaluation and Management (E/M) code.
- Appending modifier 25 to a CPT or HCPCS service code when the patient’s condition does not warrant an E/M service in addition to the procedure performed on that date.
- Using modifier 25 to indicate the need for a major surgery the day of or day after the E/M visit. (Modifier 57 should be used.).
- For information on submitting documentation at time of claim submission, go here.
- Download a PDF here.

TIPS ON MODIFIER 25

- Before assigning modifier 25 to a visit, look at the original reason for the visit and compare it to the service/procedure(s) performed.
- If the E&M service was provided in addition to the service performed, was it for an entirely separate reason? If not, then a visit is not separately billable.
- If just to see how the patient was responding since the last treatment/service, then this is considered part of the pre-service/procedure evaluation and not separately billable.
- If the patient is coming in for their biologic immunosuppressant infusion and the physician checks in to see how they are doing, that visit is not separately billable but if the patient is having increased symptoms since the last infusion and additional labs and adjustment of medications is done, then the visit would be separately billable with modifier 25.
- If the patient is coming with a completely unrelated medical problem from the scheduled service, then the visit is separately billable with modifier 25.

BOWEL SOUNDS’ SEASON FOUR COVERS DIVERSE RANGE OF TOPICS

Through a series of 19 episodes in Bowel Sounds’ 4th season, released every other Monday, Bowel Sounds covered a diverse range of topics including navigating private practice, fostering diversity and equity in pediatric gastroenterology, and exploring Cow’s milk protein proctocolitis. Bowel Sounds also collaborated with the Improve Care Now (ICN) ImPACT podcast with an episode highlighting the patient’s perspective in chronic IBD care. In addition, Bowel Sounds welcomed its first surgeon, Dr. Jacob Langer, as a guest on the show. Bowel Sounds has had the opportunity to once again conduct in-person recordings, creating a more immersive interview experience for guests, ourselves and the Bowel Sounds audience.

Throughout the season, Bowel Sounds has continued to collaborate with JPGN on special episodes highlighting key journal articles, and Bowel Sounds has diversified its guest list by interviewing international guests. Bowel Sounds also has continued to host the @PedsGIChat Twitter Chat, extending its podcast conversations and letting it engage even more with its audience.

Even though Bowel Sounds is only halfway through Season 4, it is already looking ahead to launching Season 5 in October, right after the NASPGHAN Annual Meeting. Be ready for more captivating discussions, insightful interviews, and groundbreaking insights on “Bowel Sounds.” Be sure to continue to send your suggestions and feedback to Bowel Sounds through its social media channels or by email as Bowel Sounds loves hearing from its listeners. Stay tuned as there is a lot more still to come!
Public Affairs & Advocacy Report

JENNIFER DOTSON, MD, MPH  
Chair, NASPGHAN Public Affairs & Advocacy Committee  
June 2023

118th Congress Offers Unexpected Opportunities

President Joe Biden kicked off his 2023 State of the Union address with a nod to bipartisanship saying, “We’re often told that Democrats and Republicans can’t work together. But over the past two years, we’ve proved the cynics and naysayers wrong. Yes, we disagreed. We disagreed plenty. And yes, there are times when Democrats went alone. But time and again, Democrats and Republicans came together.”

With Republicans narrowly taking control of the House following the midterm elections and a protracted inter-party fight that required 15 votes to elect Congressman Kevin McCarthy as Speaker of the House, the conventional wisdom was that the next two years — or the remainder of President Biden’s term — would be political gridlock. There are the expected budget and spending fights and long-standing party differences, but congressional leaders have sought common ground where they can early in this legislative calendar, knowing there is a small window of working in a bipartisan manner before lawmakers retreat to their respective corners in advance of the 2024 elections.

In health care, areas of early bipartisan consensus have included support for transparency and regulation of pharmacy benefit management (PBM) companies, as well as increased price transparency, particularly among hospitals. Republicans and Democrats are equally concerned about vertical health care integration and the effect on market competition, and legislation to create common-sense exceptions to step therapy protocols has already moved further in the legislative process than ever before. Yes, there is reason for optimism that even with a house divided, good policy can prevail.

Over the first half of this year, I have been excited to see cross-committee collaboration taking place, whether it is the Public Affairs and Advocacy Committee (PAAC) working with the Nutrition Committee to respond to the White House Challenge to End Hunger and Build Healthy Communities or strategizing with the IBD Committee on how to tackle payer utilization management policies.

Each month, the NASPGHAN newsletter dedicates space to advocacy and policy news. As we enter the year’s midpoint, I am pleased to provide an update on advocacy hot topics, and I ask you to continue following the work of the PAAC and respond to our “calls to action” when we must raise our collective voices in support of our patients and our profession.

Yours in Advocacy,
Jennifer L. Dotson, MD, MPH
Chair, NASPGHAN Public Affairs and Advocacy Committee

STEP THERAPY

The Senate Health, Education, Labor and Pensions Committee passed on May 11 the Safe Step Act, creating a path for full Senate passage. The bill amends the Employee Retirement Income Security Act (ERISA) to require a group health plan provide an exception process for any medication step therapy protocol, including when a patient is stable on his/her current medication. The bill passed as an amendment offered by bill sponsors Sens. Lisa Murkowski (R-AK), Margaret Hassan (D-NH) and Roger Marshall (R-KS) to legislation that requires greater transparency by pharmacy benefit management companies, restricts the practice of spread pricing, and ensures the pass through of drug rebates to insurance plans. NASPGHAN endorses the Safe Step Act, and, in the days before Committee consideration, NASPGHAN joined other medical societies in calling for the bill’s passage. NASPGHAN members are encouraged to contact their members of Congress and ask them to cosponsor the bill. Take action here.

In April, NASPGHAN was joined by ASGE, AGA and ACG in sending a letter to Capitol Hill lawmakers requesting congressional oversight of insurance companies for their interference with physician medical decision-making in the treatment of IBD patients. The NASPGHAN-led letter is in response to an increasing number of reports from NASPGHAN members about egregious utilization management tactics (prior authorization, step therapy, non-medical switching, etc.).
MEDICALLY NECESSARY NUTRITION

Work is underway by NASPGHAN and the Patients and Providers for Medically Necessary Nutrition to reintroduce the Medical Nutrition Equity Act in the 118th Congress. At the end of 2022, the legislation had 24 cosponsors in the Senate and 105 in the House. Once the legislation is reintroduced, the immediate priority will be to rebuild cosponsorship support. The legislation would require coverage across payers, both public and private, of medically necessary foods and formulas for those with GI or metabolic disorders and conditions.

In addition to pursuing legislation to improve access to medically necessary nutrition, NASPGHAN is also exploring how the Biden Administration can use its existing authorities to improve coverage and access. In January, 33 organizations endorsed a request, led by NASPGHAN, to the Centers for Medicare & Medicaid Services (CMS) to include medically-necessary nutrition, including specialized formulas, as an Essential Health Benefit (EHB) for those with GI or metabolic disorders and conditions. While it is unlikely CMS will mandate medically-necessary nutrition as an EHB, NASPGHAN hopes CMS will at least recommend coverage of medical nutrition in EHB-benchmark plans.

MAGNET SAFETY STANDARD

The magnet manufacturers (under the entity of magnetsafety.org), the Hobby Manufacturers Association, and the National Retail Hobby Stores Association have filed suit against the new federal safety standard for high-powered magnets. The complaint has been filed in the U.S. Court of Appeals for the Tenth Circuit in Colorado.

The safety standard, which took effect in October 2022, restricts the sale of consumer products designed, marketed, or intended to be used for entertainment, jewelry (including children’s jewelry), mental stimulation, or stress relief and that contain one or more loose or separable, small, high-powered magnets.

The petitioners, represented by the New Civil Liberties Alliance, claim in their petition that the Consumer Product Safety Commission is unconstitutionally structured and, therefore, lacks legal authority to act. The petitioners also claim there is no evidence that ingestion of high-powered magnets increased after the 2014 magnet safety standard was overturned.

NASPGHAN and the American Academy of Pediatrics will jointly submit to the court an amicus brief in support of upholding the federal safety standard. That brief is due on June 5.

FORMULA SHORTAGES

In March, the House Committee on Oversight and Accountability Subcommittee on Health Care and Financial Services held a hearing to examine failures that led to the 2022 formula shortage. In written testimony provided to the Subcommittee, NASPGHAN offered regulatory considerations to mitigate or prevent a future formula shortage crisis and to ensure the safety of infants, children and adults who depend on formulas. Among the recommendations was mandatory reporting of foodborne illnesses caused by Cronobacter sakazakii — an idea that seemed to garner bipartisan support among Subcommittee members.
NEWS from Our Foundation Partners

PFIZER

Clinical study for pediatric patients with moderately to severely active ulcerative colitis (UC).

Pfizer is currently recruiting for the OVATION study; a phase 3 open-label study of rofacitinib for pediatric patients aged 2-17 years old with moderately to severely active UC.

For more information, please visit: (www.ovationstudy.com) or call Pfizer CT.gov Call Center: +1-800-718-1021.

QOL Medical

QOL Medical LLC and TOTAL Diversity Clinical Trial Management would like to inform you about an ongoing pediatric clinical research study that your patients may qualify for. Possible patients must have had a disaccharidase assay and suffer with post-prandial symptoms of diarrhea, abdominal pain, gas/bloating, nausea, or borborygmi. We kindly request that you consider referring your patients to a participating physician located nearby your clinic. If this is of interest to you, please contact Micaela Irvin with TOTAL Diversity Clinical Trial Management to be connected with the participating physician’s office nearest to you.

Additionally, we are looking for the last few sites to participate in this exciting study. Please feel free to contact Micaela Irvin if you are interested in participating as a Principal Investigator and would like more details related to initiating the site selection process.

Contact Information:
Micaela Irvin
Email: (mirvin@totalcro.com)
Tel: +1 214-425-3345
Information regarding the inclusion/exclusion criteria for the study can be found here.

RECKITT/MEAD JOHNSON

Opinion Review of Article by Goh et al by Michael H. Hart, M.S., M.D.


Extensively hydrolyzed formulas (eHF) and amino acid-based formulas (AA) are the mainstay of treatment for cow’s milk allergy (CMA) in infants with IgE, non-IgE, and mixed pattern IgE/non-IgE pathophysiology. Many providers and lay public erroneously believe that extensively hydrolyzed peptide formulas are functionally interchangeable between brands of formulas. This belief is NOT the case between the various hypoallergenic formulas in the marketplace, as pointed out in this excellent review by Goh et al.

There are many differences between formulas, whether intact protein or extensively hydrolyzed peptide formulas, in macronutrient and micronutrient composition. The differences in DHA and ARA (LCPUFA) levels, type and amount/number of probiotics, prebiotics (Galactose-oligosaccharide, Polydextrose, Fructose Oligosaccharides, Human Milk Oligosaccharides (e.g., 2-Fucosyl-lactose [2FL], etc.) set each of the formulas apart from each other. The article by Goh et al is an excellent review of the differences between four extensively hydrolyzed peptide formulas (3 casein and 1 whey hydrolysate Nutramigen, Frisolac AC, Alimentum, and Nutrilon Pepti) on various immune measurements/parameters on treatment and possible benefit of induction of tolerance, which is our optimal desired secondary endpoint.

Their findings show extensively hydrolyzed casein (Nutramigen by MJN/Reckitt) had the best profile for inducing remission of symptoms and inducing tolerance in CMA, even when compared to other casein and whey commercial hydrolysates used in this study. This beneficial finding did not include the improvement in tolerance acquisition in CMA in infants receiving the Casein based extensively hydrolyzed formula (Nutramigen) with Lactobacillus rhamnosus GG (LGG) probiotics compared to extensively hydrolyzed formula without LGG. (Berni-Canani1,2).

The bottom line is best highlighted by the authors in their conclusion, which states “Thus, although extensively hydrolyzed formulas are often considered as identical, these results underline that all extensively hydrolyzed formulas should be considered separately; even those with similar sources of protein fraction. The clinical results from one formula can therefore not be generalized to another formula.”

When it comes to extensively hydrolyzed formulas (eHF): “IT MAKES A DIFFERENCE WHERE YOU CUT IT” Not all extensively hydrolyzed formulas are created equal.


Employment Opportunities

Post Your Jobs and Look for Employment Opportunities Online (and have them link to the web)

The NASPGHAN Career Center, the career resource for pediatric gastroenterology, hepatology & nutrition professionals, contains a strong source of industry jobs in the nation.

JOB SEEKERS, increase your chances of getting the job you want.
• Subscribe for free to the exclusive Job Flash™ Email and have featured jobs from our top employers sent straight to your inbox.
• Create job alerts and receive notifications when positions matching your criteria are posted.
• Access everything you need to know to plan your next career move with the Career Planning Portal

EMPLOYERS, get maximum exposure.
• Email your job offers directly to the inboxes of 2,500+ pediatric gastroenterology professionals via our exclusive Job Flash™ Email!
• Search, find, and contact qualified talent through our CV Bank
• Upgrade your job postings to distribute them to a network of more than 1,000 recruitment sites or sites that are marketed specifically to attract diverse and/or veteran candidates.

EXPLORE THE JOB BOARD & RESOURCES

JUNE 2023 EMPLOYMENT OPPORTUNITIES

• PEDIATRIC GASTROENTEROLOGIST
  University of Utah School of Medicine
  Salt Lake City, UT

• PEDIATRIC GASTROENTEROLOGIST/HEPATOLOGIST
  University of Utah School of Medicine
  Salt Lake City, UT

• PEDIATRIC GASTROENTEROLOGY FACULTY POSITION
  University of California - Davis
  Sacramento, CA

• PEDIATRIC GASTROENTEROLOGIST
  Advocate Health
  Park Ridge, IL

• PEDIATRICIAN
  Children's Hospital & Medical Center
  Omaha, NE

• PEDIATRIC CRITICAL CARE PHYSICIAN
  Penn State Health Children's Hospital
  Hershey, PA

• PEDIATRIC GASTROENTEROLOGIST
  UW Health Northern Illinois
  Rockford, IL

• PEDIATRIC GASTROENTEROLOGIST
  Ascension Medical Group
  Indianapolis, IN

• BC/BE ADVANCED GASTROENTEROLOGIST
  Spartanburg Regional Healthcare System
  Spartanburg, SC

• BC/BE GASTROENTEROLOGIST PHYSICIANS
  Spartanburg Regional Healthcare System
  Spartanburg, SC

• PEDIATRIC GASTROENTEROLOGIST
  Nemours
  Pensacola, FL

• OUTPATIENT GENERAL PEDIATRICIAN
  Penn State Health
  Carlisle, PA

• BC/BE PEDIATRIC GASTROENTEROLOGIST
  Peyton Manning Children's Hospital
  Evansville
  Evansville, IN

• PEDIATRIC GASTROENTEROLOGIST
  Mid-Atlantic Permanente Medical Group
  Washington, DC

• GENERAL PEDIATRICIAN
  Penn State Health
  Lancaster, PA

• COMPLEX CARE PEDIATRICIAN - SECTION OF COMPLEX CARE/ DIVISION OF GENERAL PEDIATRICS
  Penn State Health
  Hershey, PA

• PEDIATRIC RADIOLOGIST & NEURORADIOLOGIST
  Norton Medical Group
  Louisville, KY

• PEDIATRIC RADIOLOGIST & NEURORADIOLOGIST
  Norton Medical Group
  Louisville, KY

• PEDIATRIC RADIOLOGIST & NEURORADIOLOGIST
  Norton Medical Group
  Louisville, KY

• PEDIATRIC RADIOLOGIST & NEURORADIOLOGIST
  Norton Medical Group
  Louisville, KY

• PEDIATRIC GASTROENTEROLOGIST - CLINICAL ASSISTANT, ASSOCIATE, OR FULL PROFESSOR
  UBMD Pediatrics
  Buffalo, NY

• JOIN OUR TALENTED TEAM AT GEISINGER MEDICAL CENTER - EXCELLENT INCENTIVE PACKAGE
  Geisinger Health System
  Danville, PA
- **PHYSICIAN - PEDIATRIC GASTROENTEROLOGIST (GENERAL GI, ADVANCED ENDOSCOPY, MOTILITY DISORDERS)**
  Baylor College of Medicine
  *San Antonio, TX*

- **DIVISION CHIEF, PEDIATRIC GASTROENTEROLOGY**
  Nemours
  *Jacksonville, FL*

- **PEDIATRIC GASTROENTEROLOGY - NP OR PA**
  Palo Alto Foundation Medical Group
  *San Jose, CA*

- **PEDIATRIC GASTROENTEROLOGY**
  Palo Alto Foundation Medical Group
  *San Carlos, CA*

- **PEDIATRIC GASTROENTEROLOGIST**
  Saskatchewan Health Authority
  *Saskatoon, SK*

- **PEDIATRIC GASTROENTEROLOGIST**
  Norton Children's Medical Group
  *Louisville, KY*

- **PEDIATRIC GASTROENTEROLOGY HOSPITALIST**
  Geisinger
  *Danville, PA*

- **PEDIATRIC GASTROENTEROLOGIST WITH THE UNIVERSITY OF ARIZONA (TUCSON, AZ)**
  Banner University Medical Center Tucson (BUMC-T)
  *Tucson, AZ*

- **PEDIATRIC GASTROENTEROLOGIST**
  GI For Kids
  *Knoxville, TN*

- BE/BC PEDIATRICIAN
  Piedmont Healthcare
  *Columbus, GA*

- **BOARD-CERTIFIED FAMILY MEDICINE PHYSICIAN**
  Piedmont Healthcare
  *Columbus, GA*

- **PEDIATRIC SURGEON**
  Tower Health
  *Philadelphia, PA*

- **PEDIATRIC NEUROLOGIST & EPILEPTOLOGIST OPPORTUNITIES MEDICAL DIRECTOR & CHIEF OF PEDIATRIC EPILEPSY OPPORTUNITY NORTON CHILDREN'S MEDICAL GROUP LOUISVILLE, KY**
  Norton Children's Medical Group
  *Louisville, KY*

- **PEDIATRIC GASTROENTEROLOGY IN FREESTANDING PEDIATRIC HOSPITAL**
  Arkansas Children's Hospital Northwest
  *Springdale, AR*

- FULL TIME PEDIATRIC GASTROENTEROLOGIST FOR LARGE PUBLIC HEALTH AND HOSPITAL SYSTEM IN SILICON VALLEY
  County of Santa Clara Health & Hospital System
  *San Jose, CA*

- **PEDIATRIC GASTROENTEROLOGIST**
  Children's Mercy Kansas City
  *Kansas City, MO*

- **VIEW ALL JOBS**